

Learner's Guide

Individual and Family Support (IFS) Provider Training

Module #1

“Using IFS Flexibility”

Presented by: Office for Citizens with Developmental Disabilities

August 2010



Purpose of Training Course:

This training is targeted to New Opportunities Waiver (NOW) Individual and Family Support (IFS)/Attendant Care Services (ACS) providers. The training provides concise information and visual explanation related to Section 5 of the *Guidelines for Support Planning*. Information provided will enhance understanding and application of mechanisms to successfully support people while remaining within an individual's planned hours.

Specifically, this training will discuss the definition and purpose of IFS Flexibility, as well as provide information about appropriate usage and tracking of IFS Flexible Hours. The training will also cover billing-related issues with IFS Flexibility and will introduce the new IFS Flexibility tracking system developed by Statistical Resources, Inc. (SRI).

This training is intended for both supervisors and billing personnel.

Course Objectives:

Upon completion of the training, participants should know the following:

- 1) Provider responsibilities with IFS Flexibility
- 2) Purpose and benefits of IFS Flexibility
- 3) Types of deviations that use IFS Flexibility hours and types that do not
- 4) How to use IFS Flexibility appropriately
- 5) How to bill for and track usage of IFS Flexibility
- 6) When to request plan revisions

Key Terms:

ACS	=	Attendant Care Services
ADL's	=	Activities of Daily Living
CPOC	=	Comprehensive Plan of Care
GFSP	=	<i>Guidelines for Support Planning</i>
GPSORC	=	Guidelines for Planning State Office Review Committee
IFS hours	=	Individual and Family Support hours
PA	=	Prior-Authorized
SIL	=	Supported Independent Living service
SRI	=	Statistical Resources Inc. (Data management contractor)
1:1	=	1 individual supported by 1 staff
2:1	=	2 individuals supported by 1 staff
3:1	=	3 individuals supported by 1 staff

Training Course Content:

1) IFS Provider Responsibilities:

As a provider you carry the responsibility of the day-to-day implementation of the elements in the support plan, including the typical weekly schedule. Because the appropriate use of IFS flexibility relies heavily upon how a schedule is implemented, providers also carry the responsibility of utilizing IFS flexibility, as well as recording how it is used.

Your four primary responsibilities are:

1. Assure health/safety, mitigate risks with changes to scheduled supports and use of IFS flexibility.
 - You must assure health/safety when a participant uses a support that is *different* from what is scheduled (whether he uses unpaid support or a different *kind* of paid supports).
 - You are responsible for risk mitigation if you don't deliver a service as planned.
2. Document the use of IFS flexibility and schedule changes.
 - Documentation is required for Health Standards reviews and legislative/state audits.
3. Keep track of:
 - 1) Usage of prior-authorized hours
 - 2) Usage of IFS flexibility
 - ♦ Use the reports available from Statistical Resources, Inc. (SRI) to assist you with tracking hours.
 - ♦ Work with participants and families on managing their hours and flexibility use within the quarter.

Important: Communication between the SIL/IFS Supervisors and billing personnel is *crucial* in managing hours usage and making sure everyone is on the same page.

4. Maintain continual communication with support coordinator about usage of hours and notify him/her when a plan revision is needed.
 - Some things to discuss:
 - Is participant running through his prior-authorized hours too quickly?
 - Is he converting a lot of his hours?
 - If either of these is occurring, you may need to request a plan revision.

Important: As providers, you will know the details of a person's routine. It is up to you to let the Support Coordinator know when a typical weekly schedule and budget is not correct and when a plan revision is needed.

2) What is IFS Flexibility?

IFS Flexibility allows for participants to deviate from their typical weekly schedules and receive a type of supports that may be different from what is included in their typical schedules. IFS Flexibility accommodates unexpected changes in routine and/or personal preference.

Participants can:

- Use a type of IFS not included in schedule
- Use a type of IFS in excess of what is included in schedule

To use IFS Flexibility, your billing staff with work within the SRI system to convert prior-authorized IFS hours into the type of IFS hour that the participant needs/wants.

There are limits to the amount of IFS hours that can be converted. In addition, IFS Flexibility does not allow participants to exceed their quarterly budgets. IFS Flexibility occurs within the budget. Any hours usage exceeding the budget requires plan revision and approval.

3) Not IFS Flexibility

Some participants have regular deviations that may occur in their typical weekly schedule. These include omissions and swapping/exchanging IFS hours evenly. These types of deviations *do not count* toward use of IFS flexibility.

Omissions: Occur when people unexpectedly use natural supports or unsupported time.

- If consistent with plan needs and CPOC goals, family members/friends can provide unscheduled or unplanned natural supports.
- With usage of unplanned/unscheduled natural supports or unsupported time, providers must continue to maintain health/safety assurances and ensure that the participant's CPOC goals are being met.
 - *Example of health/safety assurances*: A family member shows up unexpectedly and wants to take Johnny out to dinner (without staffing). You must make sure the family member is appropriately prepared to provide for Johnny's needs. For instance, if Johnny has diabetes, does the family member know how to check blood sugar levels before and after meals? If Johnny is at risk for choking when he eats, is the family member aware that she must chop/dice his food prior to eating?

Swapping/Exchanging hours evenly: occurs when people use hours or supports at a different time or day than what is scheduled.

- This type of schedule deviation is useful for:
 - 1) People who have jobs with varying shifts or work days
 - 2) People who do not require 24-hour supports and want to arrange their supports differently based on preferences/interests

4) Omissions in Hours (Example)

- Sara's Typical Sunday Schedule:
 - 8-10 IFS Staffing
 - 10-1 Church attendance with a neighbor
 - 1-8 IFS Staffing
- Sunday Schedule Deviation:
 - 8-10 IFS Staffing
 - 10-3 Sara to church and out to eat with her parents
 - 3-8 IFS staffing
- Omission of IFS Hours:
 - 1-3 on Sunday (2 hours)

In this example, Sara typically uses natural supports from 10:00 to 1:00 on Sunday. However, this coming Sunday, she deviates from her schedule and uses natural supports from 10:00 to 3:00 (an extra 2 hours). This results in an omission of scheduled staffing hours from 1:00 to 3:00 for this particular Sunday.

5) Swapping Hours Evenly (Example)

- Eric's Typical Week:
 - Work Monday, **Tuesday**, and Friday 8-2:30
 - IFS hours on work days
 - 7- 8 AM
 - 2:30-4:30 PM
- Eric's work schedule changes every two weeks to rotate one day:
 - This cycle is Monday, **Wednesday**, and Friday 8-2:30
- Swap Hours Evenly:
 - Swap Tuesday and Wednesday

In this example, Eric's typical work week is Monday, Tuesday, and Friday from 8:00-2:30. However, this coming week, his work schedule changes to Monday, Wednesday, and Friday from 8:00-2:30. This deviation results in Eric using his staffing hours differently on Tuesday and Wednesday to allow for his revised work schedule. He simply swaps his Tuesday IFS and work hours with his Wednesday IFS and work hours.

6) Benefits of IFS Flexibility

- Participants and providers can work together to make supports work in the real world.
 - IFS Flexibility allows for realistic provision of supports.
 - IFS Flexibility allows providers and participants to work together to arrange supports in creative individualized ways.
- Reduces the need to request plan revision during the quarter.
 - IFS Flexibility will not *eliminate* the need for plan revisions in certain situations.
- Makes sharing supports more functional (casual sharing).
 - Allows people to share at a different time or with an additional person.
 - Allows for provision of 1:1 supports in situations in which shared supports are interrupted.

7) Type of IFS Not Included in Schedule

The first way to use IFS Flexibility is by using a type of IFS not included in the typical schedule or budget sheet.

Example:

Tim's schedule includes 2:1 hours. He usually goes to the movies with a friend every month and shares supports. This week, he invites an additional friend along and uses 3:1 hours instead.

- Tim's unused 2:1 hours convert to 3:1 hours, even though not in PA.
- The conversion is completed when the billing is entered into the SRI (Statistical Resources Inc.) system.

Important:	Any changes in delivery of supports (i.e., using 3:1 instead of 2:1) must be allowable as per the CPOC and risk mitigation strategies.
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8) Type of IFS in Excess of What's Planned

A second way to use IFS Flexibility is to use a type of IFS in excess of what is planned in the schedule and budget sheet.

Example:

Sara's quarterly PA amount includes 120 hours of 1:1 and 780 hours of 2:1. She wants to go on a weekend vacation with her roommate which is not planned in an alternate schedule. Sara uses extra 2:1 hours over the weekend (as she shares supports with her roommate) and not the 1:1 hours as planned.

- Sara's unused 1:1 day hours → convert to extra 2:1 day hours.
- The conversion is completed when the billing is entered into the SRI system.

9) Who can use IFS Flexibility?

The GFSP format includes required documentation for use of IFS flexibility. This documentation is discussed in Sections 6.3 and 6.4 of the GFSP. The documentation is significantly different than what is requested in older plan formats.

- Plans in the new format (*per GFSP*) are already set up to use IFS Flexibility. No changes are needed.
 - New participants with initial plans approved after 7/1/2009
 - Continuing participants with annual plans approved after 10/1/2009
- People with plans in old format will need revisions to Section III of CPOC to use IFS Flexibility.
 - Continuing participants with initial/annual plans approved prior to 10/1/2009
- Sections 6.3 and 6.4 of the GFSP discuss documentation requirements needed for participants to use IFS Flexibility.
 - Section III.B – roommate information
 - Section III.B – intermittent supports/unsupported information
 - Section III.C – casual sharing information

Note: Once revisions are approved by Regional Office, Regional Office will inform SRI to “turn on” IFS Flexibility for that person. This type of revision will not change a person's annual date.

10) Section III of CPOC

In order to use IFS flexibility, people whose plans are in the old format must have the following revisions to Section III of their CPOC's:

- Section III.B Current Living Situation
 - Criteria: sharing supports with roommates (See page 3, Items 1-7 of “Accessing IFS Flexibility”)
 - This information is required for:
 - 1) Those living independently
 - 2) Those living with family who share supports with another who lives in family home
 - *Must have names in CPOC, provider service plan*

- Criteria: intermittent supports/unsupported time (See page 5, Items 1-2 of “Accessing IFS Flexibility”)
- This information required for all participants
- Section III.C Current Community Supports
 - Criteria: casual shared supports (See Page 4, Items 1-3 of “Accessing IFS Flexibility”)
 - This information required for:
 - 1) Those living independently
 - 2) Those living with family who want to use IFS Flexibility to share supports
 - *Names not required in CPOC, provider service plan*
- See attached handout “Accessing IFS Flexibility” .
 - » Page 3: 7 items to be included in Section III.B (roommate documentation)
 - » Page 5: 2 items to be included in Section III.B (intermittent supports documentation)
 - » Page 4: 3 items to be included in Section III.C (casual sharing documentation)

11) Provider Service Plan

Items addressed in Section III.B and III.C also need to be addressed in the provider service plan.

Important to include:

1. Specific detail about how certain supports will be offered on a day-to-day basis.
2. How the provider will address a person’s use of IFS flexibility.

This information in the provider service plan helps to keep everyone on the same page (i.e., SIL/IFS supervisor, DSWs, participants, family members, etc.).

Providers must consider what is involved with changing the way that supports are delivered. Providers must continue to maintain health/safety assurances as well as continue to meet CPOC goals even when a person uses IFS flexibility.

- Consider the following:
 - Will a change in support type change what is required of staff?
 - Will a change in support type impact the completion of scheduled ADL’s/medication administration?

12) Decisions About Flexing Hours

Supervisors should be prepared to weigh the different acting factors when working with the participant to make choices about use of IFS flexibility.

Factors affecting IFS Flexibility usage:

- Based on participant-driven preferences, interests, needs
- Consider programmatic implications
 - Health and Safety/ Risk Mitigation
 - Can the person’s health/safety be (reasonably) assured with a change in his supports?

- Achieving plan goals
 - Can the person fulfill his CPOC goals scheduled for that time period if his supports change?
 - Are there other CPOC goals that he can fulfill instead with this change in supports?
- Make sure is allowable
 - Fits in 20% limit
 - Fits in quarterly budget amount
 - Agencies may want to work out systems to facilitate communication between SIL/IFS Supervisors and Billing departments to make sure that services are being delivered within limits.

13) Documenting Deviations

Every deviation, including omissions, must be documented.

- Documentation must include:
 - Explanation that deviation was participant-driven.
 - Explanation of type of support used in place of scheduled supports.
 - Documentation should show that deviation was in support of CPOC goals and consistent with service plan instructions.
- See handout “Documentation of Schedule Deviations” below

Note: The CPOC may note that deviations are expected, such as when a participant has a job with a swing-shift schedule or has family involvement/natural supports who aren’t involved on a regular set schedule.

Documentation of Schedule Deviations

Items to include in the documentation:

- 1) What the person was scheduled to use (1:1, 2:1, natural supports, etc.)
- 2) What the person used instead
- 3) What time the deviation occurred
- 4) Why the deviation occurred (consumer-driven purpose)
- 5) The goals and/or support strategies that will be affected by the schedule change
- 6) How those goals/support strategies will be completed with the schedule change

Remember: Staff must provide the above information for *every* deviation including flexed hours, omission of hours, and exchanges of hours.

Examples:

1. **Omission of hours:** Tommy lives at home with his mom. He is scheduled to receive 1:1 supports every Saturday afternoon from 2:00 p.m. – 5:00 p.m. so that his mother may leave to do some grocery shopping. During his 1:1 time, there are a few support strategies that he and his staff usually complete: 1) Staff will administer Tommy’s medication, 2) Staff will teach Tommy to water the outdoor plants on the patio, and 3) Staff will assist Tommy with removing his dirty bed sheets and making the bed with clean sheets. This Saturday, Tommy’s mother decides to stay home all day because she is not feeling well enough to go grocery shopping. She requested that staff not come this Saturday and that she would give Tommy his medication, help him with his bed sheets and with watering the plants.

Documentation: 2:00 p.m.-5:00p.m. (1:1) → 2:00 p.m.-5:00p.m natural supports. Mom did not need staff today because she stayed home. She agreed to complete scheduled support strategies (give meds, remove dirty bed sheets and put on clean ones, and teach him to water plants). No problems/ risk factors with this schedule change. Consistent with service plan.

2. **Flexed (converted) hours:** Julie usually shares supports every Friday night from 6:00 p.m. to 10:00 p.m. with her friend, Rita. They do different activities every Friday, such as going to the movies, going to a concert at the local park, or going to the mall. During her 2:1 time with Rita, there are a few support strategies that she and her staff usually complete: 1) Staff will provide Julie with transportation to the event she wants to attend, 2) Staff will remind Julie to use her verbal communication skills, and 3) Staff will assist Julie with counting out her money to pay for the event (when there are costs). This Friday, Julie decided that she wanted to spend time with Rita and another friend, Sherry. Rita agreed and they invited Sherry to spend time with them Friday night. The IFS provider agreed to accommodate the 3:1 shared supports among the three ladies for Friday night. The assigned staff agreed that she would be able to assist Julie with completion of her support strategies as scheduled.

Documentation: 6:00 p.m.-10:00 p.m. (2:1) → 6:00 p.m.-10:00 p.m. (3:1). Julie usually shares supports with Rita, but they decided to invite another friend tonight. Julie, Rita, and Sherry shared supports while attending a movie. This was their first time to share supports together. They got along well together. I assisted Julie as usual with her support strategies (see documentation of progress). No problems/ risk factors with this schedule change. Consistent with service plan.

3. **Even exchange of hours:** Beth works part-time at a local bakery on Monday, Wednesday, and Friday from 8:00 a.m. to 3:00 pm. In the evenings, she shares supports with her roommate. On her non-work days (Tuesday and Thursday), she shares supports with her roommate all day. There are a few support strategies that she and her staff usually complete on her non-work days: 1) Staff will assist her with paying her bills (if any), 2) Staff will teach her to wash her clothing, and 3) Staff will teach her to prepare her meals. This coming week, the bakery will be closed on Monday, so she is scheduled to work Tuesday instead of Monday. Since she won’t be able to complete her support strategies as scheduled on Tuesday, she and the staff person decided they would complete those items on Monday instead. Julie’s schedule change will “swap” her Monday hours with her Tuesday hours. (Note: With work schedules such as this, the CPOC should note that this type of deviation is expected)

Documentation:

Monday: 3:00 p.m.-10:00 p.m. (2:1) → 8:00 a.m.-10:00 p.m. (2:1). Schedule change at Beth’s workplace. She is working Tuesday instead of today. I assisted Beth with her support strategies scheduled for Tuesday (paying bills, washing clothing, preparing meals) (see documentation of progress). No problems/ risk factors with this schedule change. Consistent with service plan.

Tuesday: 8:00 a.m.-10:00p.m. (2:1) → 3:00 p.m. -10:00 p.m. (2:1). Schedule change at Beth’s workplace. She worked today instead of Monday. I assisted Beth with her support strategies scheduled for today (paying bills, washing clothing, preparing meals) on Monday. No problems/ risk factors with this schedule change. Consistent with service plan.

14) Limits to IFS Flexibility

IFS flexibility (conversions of hours) is allowed up to 20% of a person's total prior-authorized hours each quarter. The IFS Flexibility amount is determined by figuring 20% of one's total approved units for the quarter (including those approved in alternate schedules).

Once the 20% limit is reached, services provided outside of what is prior-authorized will not be approved.

- Providers can still bill for remaining prior-authorized hours in the quarter.
- Plan revision is needed if providers must bill for services not prior-authorized.

Important: Plan revisions may alter one's IFS flexibility limit if the revision includes more or less hours than the original schedule. For example, a revision to a schedule that includes fewer p.a. hours will result in fewer flex hours as well.

15) Limits to IFS Flexibility

Due to limitations on the amount of IFS flexible hours, IFS flexibility should only be used for *unexpected changes* in a person's schedule. Any events that are expected or can be predicted should be included in the typical weekly or in an alternate schedule.

Teams must conduct thorough planning and develop typical weekly schedules that are realistic and fit what the person really does on a day-to-day basis. IFS flexibility will probably not be sufficient to cover deviations for participants whose schedules don't reflect their actual routines.

- Focus on correctly identifying the IFS hour types that will be used most often by the participant.
- Typical weekly schedule must be:
 - Accurate
 - Reflective of person's actual routine
 - Include IFS hours types used most often

16) Billing and IFS Flexibility

The prior-authorization process:

- 1) SRI provides prior authorization based upon the CPOC budget sheet.
 - A single "PA" number is issued for the total amount of IFS hours for the entire quarter (this is clearly seen on the reports that you receive from SRI).
- 2) As prior-authorized hours are billed, these are deducted from the quarterly total
 - The "CPOC Service Balance" from SRI shows how many hours have been used (deducted) and how many are still available.

17) Example of “CPOC Service Balance”:

Date Range: 06/01/10 - 07/30/10		Target Population: ALL					
Case: ALL	SSN: ALL	Name: JONES, TAMMY					
Date: 07/23/2010 Time: 14:13:10		LOUISIANA DEPARTMENT OF HEALTH & HOSPITALS LOUISIANA SERVICE TRACKING (v 3.26) 25999 PCA R US CPOC SERVICE BALANCE					
Consumer		CPOC					
Name: JONES, TAMMY	Case #: 00006	SSN: 340-98-3957	Date Range: 04/17/2010 - 04/16/2011				
Target: NOW							
Procedure Code	PA #	PA Date	Units Allowed	Spent	PA Cap Units	Balance Units	Flex Units Available
\$5125 U1	158795052	07/01/2010 - 09/30/2010	120	\$ 448.80	113	0	0.0
\$5125 U1 UW		07/01/2010 - 09/30/2010	0	\$ 0.00	0	0	
\$5125 U1 UP		07/01/2010 - 09/30/2010	0	\$ 0.00	0	0	
\$5125 UJ		07/01/2010 - 09/30/2010	50	\$ 108.50	63	0	
\$5125 UN UJ		07/01/2010 - 09/30/2010	0	\$ 0.00	0	0	
\$5125 UP UJ		07/01/2010 - 09/30/2010	0	\$ 0.00	0	0	
Subtotal:				\$ 557.30			
Total:				\$ 557.30			

This is an example of the new “CPOC Service Balance”:

- The “Units Allowed” column shows what units can be billed for.
- The “PA CAP Units” column shows what the limit is on the total amount (amount of PA units).

*In this example, the person used more “U1” hours (120) than what is allowed in his “cap” (113), thus some of the additional hours used were flexible hours.

Remember: The SRI information is only as accurate as the latest billing entered by your agency.

18) Billing and IFS Flexibility

When IFS Flexibility is used, a provider bills for the type of service that was delivered. If the provider does not have a PA for that type, that is okay. The provider should continue entering the service information as it was delivered. The SRI system will recognize that there is not a PA for that type. As this happens, the “IFS Flexibility” tracking system is initiated:

- The system will request that the provider specifies which type of PA hour the “flexed” hour will be “borrowed” from.
- The system will automatically do the conversions of the PA hour to the non-PA hour.

19) First Screen: Typical Data Entry

Services: ADD/NEW

Case #: 00006 Name: JONES, TAMMY Date of Birth: 04/06/1966 Age: 44

Service Filters: Case #: Date: 04/22/2010

Sort Order: ☒ Physical ☐ Case # ☐ Reference # ☐ Date

CASE #	PROCEDURE	DATE	BEGIN	END	LENGTH	Source Proc.	FEE	Contact	STAFF	REFERENCE #	Appt.	VOID
00006	S5125 U1	07/02/2010	07:00	12:00	05:00		0.00		AAAA			No
00006	S5125 U1	07/03/2010	07:00	12:00	05:00		0.00		AAAA			No
00006	S5125 U1	07/04/2010	07:00	12:00	05:00		0.00		AAAA			No
00006	S5125 U1	07/05/2010	07:00	12:00	05:00		0.00		AAAA			No
00006	S5125 U1	07/06/2010	07:00	12:00	05:00	S5125 UJ	0.00		AAAA			No
00006	S5125 U1	07/07/2010	07:00	12:00	05:00		0.00		AAAA			No
00006	S5125 UJ	07/08/2010	19:00	24:00	05:00		0.00		AAAA			No
00006	S5125 UJ	07/09/2010	19:00	24:00	05:00		0.00		AAAA			No
00006	S5125 UJ	07/10/2010	19:00	24:00	05:00		0.00		AAAA			No
00006	S5125 U1	07/11/2010	12:00	14:00	02:00	S5125 UJ	0.00		AAAA			No
00005	T2019	07/15/2010	07:00	12:00	05:00		0.00		BBBB			No
00005	T2019	07/16/2010	07:00	12:00	05:00		0.00		BBBB			No
00006	S5125 U1	07/17/2010	12:00	13:40	01:40		0.00		AAAA			No
00006	S5125 U1	07/18/2010	12:09	14:00	01:51	S5125 UJ	0.00		AAAA			No
00006	S5125 U1	07/19/2010	12:00	15:00	03:00	S5125 UJ	0.00		AAAA			No
00006	S5125 U1	07/20/2010	12:00	13:00		S5125 UJ	0.00		AAAA			No

As long as an agency bills for units that are prior-authorized, this is what you will see: a typical data entry screen.

20) Strategy for Non-PA hours

When a provider bills for an IFS type for which there is no PA, SRI will request for billing entry to specify from where (what category of IFS type) to convert hours.

- There may be various options for conversion if the person has more than one PA'd IFS type (day, night, 1:1, 2:1).

When deciding from where to convert or "borrow" the needed hours, consider the following:

- IFS hours conversions are not usually equal exchanges of hours. For example, a 1:1 day hour uses approximately two 2:1 day hours. This leaves the participant with fewer total hours for the quarter.
- It is most important to flex from the *right place or right category* of hours.
- Do not generalize these decisions based on other individuals in the agency. Make the decision based upon *this* individual's needs.
- Select from PA hours based on
 - Less used
 - Less conversion/fiscal/supports impact
 - Less likely to run out of type at end of quarter

Note: In order to make the best decision about where to convert from (both financially and programmatically), the billing department and the SIL/IFS supervisor should discuss the available options.

21) Second Screen: Billing for Units Not Covered (Prior-Authorized)

Services: EDIT/MODIFY

Case #: 00006 Name: JONES, TAMMY Date of Birth: 04/06/1966 Age: 44

Service Filters: Case #: Date: 04/23/2010

Sort Order: ☒ Physical ☐ Case # ☐ Reference # ☐ Date

CASE #	PROCEDURE	DATE	BEGIN	END	LENGTH	Source Proc.	FEE	Contact	STAFF	REFERENCE #	Appt.	VOID
00006	S5125 UJ	07/08/2010	19:00	24:00	05:00		0.00		AAAA			No
00006	S5125 UJ	07/09/2010	19:00	24:00	05:00		0.00		AAAA			No
00006	S5125 UJ	07/10/2010	19:00	24:00	05:00		0.00		AAAA			No
00006	S5125 U1	07/11/2010	12:00	14:00	02:00	S5125 UJ	0.00		AAAA			No
00005	T2019	07/15/2010	07:00	12:00	05:00		0.00		BBBBB			No
00005	T2019	07/16/2010	07:00	12:00	05:00		0.00		BBBBB			No
00006	S5125 U1	07/17/2010	12:00	13:40	01:40		0.00		AAAA			No
00006	S5125 U1	07/18/2010	12:00	13:40	01:40		0.00		AAAA			No
00006	S5125 U1	07/19/2010	12:00	13:40	01:40		0.00		AAAA			No
00006	S5125 U1	07/20/2010	12:00	13:40	01:40		0.00		AAAA			No
00006	S5125 UJ	07/23/2010	01:00	02:00	01:00		0.00		AAAA			No
00006	S5125 UJ	07/23/2010	05:00	06:00	01:00		0.00		AAAA			No

WARNING

There are insufficient units to cover this service.

Do you wish to use Flexible units from another IFS service?

Yes No

This is what appears if an agency bills for units not prior-authorized. A prompt will appear, asking if you want to use “Flexible units” from another type of IFS.

22) Third Screen: Meeting the 20% Limit

LAST v3.26: User: 0000

File Services LTPCS/PAS/CS Consumer PA Agency Info. Trans. Reports Super About

Services: EDIT/MODIFY

Case #: 00006 Name: JONES, TAMMY Date of Birth: 04/06/1966 Age: 44

Service Filters: Case #: Date: 04/23/2010

Sort Order: ☒ Physical ☐ Case # ☐ Reference # ☐ Date

CASE #	PROCEDURE	DATE	BEGIN	END	LENGTH	Source Proc.	FEE	Contact	STAFF	REFERENCE #	Appt.	VOID
00006	S5125 U1	07/01/2010	07:00	12:00	05:00		0.00		AAAA			No
00006	S5125 U1	07/02/2010	07:00	12:00	05:00		0.00		AAAA			No
00006	S5125 U1	07/03/2010	07:00	12:00	05:00		0.00		AAAA			No
00006	S5125 U1	07/04/2010	07:00	12:00	05:00		0.00		AAAA			No
00006	S5125 U1	07/05/2010	07:00	12:00	05:00		0.00		AAAA			No
00006	S5125 U1	07/06/2010	07:00	12:00	05:00	S5125 UJ	0.00		AAAA			No
00006	S5125 U1	07/07/2010	07:00	12:00	05:00		0.00		AAAA			No
00006	S5125 UJ	07/08/2010							AAAA			No
00006	S5125 UJ	07/09/2010							AAAA			No
00006	S5125 UJ	07/10/2010							AAAA			Yes
00006	S5125 U1	07/11/2010							AAAA			No

Field Validation

Insufficient flex units remain. (7) units were converted over.

OK

This is what will appear when the 20% limit has been reached.

- Billing for prior-authorized units only is still allowable after this point.
- You may continue to swap/evenly exchange PA hours within the schedule.

Important: It is crucial your agency tracks usage of the 20% so that you don't end up short of hours at the end of the quarter.

23) Tracking the 20% Limit

SRI focuses on quarterly total and post-authorization billing.

Example:

Lisa's schedule includes 5 hours of 1:1 Day every Saturday. Since there are 12 Saturdays within this quarter, she has a total of 60 hours of 1:1 Day hours prior-authorized for the entire quarter. SRI does not focus on the day-to-day delivery of services within the typical schedule. SRI does not focus on the fact that the prior-authorized 1:1 Day hours are scheduled for Saturdays, SRI only focuses on the amount of hours prior-authorized for the quarter. So, if Lisa wants to use her 5 hours of 1:1 Day on a Tuesday instead, she may do so.

- 5 hrs (1:1 Day) x 12 days (every Sat. in quarter) = 60 hrs 1:1 Day for entire quarter.
- SRI doesn't focus on the "5 hours every Saturday", but rather "60 total hours for the quarter".

24) Tracking the 20% Limit

SRI begins tracking use of IFS flexibility and the 20% limit when the following happens:

1. A person uses all prior-authorized hours of a certain type, and keeps using those hours beyond what is prior-authorized, *or*,
2. A person uses a type of IFS hour not prior-authorized.

Both of these situations will result in the agency flexing or converting IFS hours to cover the deviation.

25) Using the "CPOC Service Balance"

Date Range: 06/01/10 - 07/30/10

Target Population: ALL

Case: ALL

SSN: ALL

Name: JONES, TAMMY

Date: 07/23/2010

Time: 14:13:10

LOUISIANA DEPARTMENT OF HEALTH & HOSPITALS

LOUISIANA SERVICE TRACKING (v 3.26)

25999 PCA R US

CPOC SERVICE BALANCE

Page: 1

Consumer

CPOC

Name: JONES, TAMMY

Case #: 00006

SSN: 340-98-3957

Date Range: 04/17/2010 - 04/16/2011

Target: NOW

Procedure Code	PA #	PA Date	Units Allowed	Spent	PA Cap Units	Balance Units	Flex Units Available
S5125 U1	158795052	07/01/2010 - 09/30/2010	120	\$ 448.80	113	0	0.0
S5125 U1 UN		07/01/2010 - 09/30/2010	0	\$ 0.00	0	0	
S5125 U1 UP		07/01/2010 - 09/30/2010	0	\$ 0.00	0	0	
S5125 UJ		07/01/2010 - 09/30/2010	50	\$ 108.50	63	0	
S5125 UN UJ		07/01/2010 - 09/30/2010	0	\$ 0.00	0	0	
S5125 UP UJ		07/01/2010 - 09/30/2010	0	\$ 0.00	0	0	
Subtotal:				\$ 557.30			
Total:				\$ 557.30			

Here is an example of how the "CPOC Service Balance" will look as IFS Flexibility is used.

- Working toward the 20% limit is shown in the "Flex Units Available" column.

*In this example, the person used more "U1" hours than he was prior-authorized for. As a result, some of his "UJ" hours were converted to "U1" to cover the extra usage of hours. After this conversion, he has met his 20% limit ("0.0"). In addition, he has used all of his prior-authorized units (see "Balance Units").

26) Using the “Service Event List”

Date Range: 06/01/10 - 07/30/10

Target Population: ALL

Procedure Code: ALL

Provider: ALL

SSN: ALL

PA: ALL

Name: JONES, TAMMY

Date: 07/22/2010

Time: 14:55:46

LOUISIANA DEPARTMENT OF HEALTH & HOSPITALS

LOUISIANA SERVICE TRACKING (v 3.26)

25999 PCA R US

SERVICE EVENT LIST by (Date / Time / Name)

Page: 1

Support Staff		Case#	Consumer Name	Target	Service Date	Begin Time	End Time	Procedure Code	Borrowed		Contact	Fee	Void	Incl in Info File
ID	Name								Source	Units				
AAAA	PHILLIPS	00006	JONES	NOW	07/01/10	07:00	12:00	S5125 U1		0.0		0.00	No	/ /
AAAA	PHILLIPS	00006	JONES	NOW	07/02/10	07:00	12:00	S5125 U1		0.0		0.00	No	/ /
AAAA	PHILLIPS	00006	JONES	NOW	07/03/10	07:00	12:00	S5125 U1		0.0		0.00	No	/ /
AAAA	PHILLIPS	00006	JONES	NOW	07/04/10	07:00	12:00	S5125 U1		0.0		0.00	No	/ /
AAAA	PHILLIPS	00006	JONES	NOW	07/05/10	07:00	12:00	S5125 U1		0.0		0.00	No	/ /
AAAA	PHILLIPS	00006	JONES	NOW	07/06/10	07:00	12:00	S5125 U1	S5125 UJ	12.1		0.00	No	/ /
AAAA	PHILLIPS	00006	JONES	NOW	07/07/10	07:00	12:00	S5125 U1	0	0.0		0.00	No	/ /
AAAA	PHILLIPS	00006	JONES	NOW	07/08/10	19:00	24:00	S5125 UJ		0.0		0.00	No	/ /
AAAA	PHILLIPS	00006	JONES	NOW	07/09/10	19:00	24:00	S5125 UJ		0.0		0.00	No	/ /
AAAA	PHILLIPS	00006	JONES	NOW	07/10/10	19:00	24:00	S5125 UJ	0	0.0		0.00	No	/ /
AAAA	PHILLIPS	00006	JONES	NOW	07/11/10	12:00	14:00	S5125 U1	S5125 UJ	0.0 *		0.00	No	/ /

This is an example of the “Service Event List”. Use of IFS Flexibility is also tracked here (as well as the “CPOC Service Balance”). You can see from where the flex units were “borrowed” by looking at the “Service Event List”. The “Borrowed” column shows what type of IFS hours were converted (“Source”) and how many units were converted (“Units”).

Remember, once the 20% limit is met, a provider agency may only receive reimbursement for service delivery consistent with what is PA. If necessary, a plan revision may be completed to:

1. Change the remaining PA (to get the type of hours needed), *or*
2. Receive additional PA hours (and additional flex hours).

*This “Service Event List” matches the “CPOC Service Balance” shown earlier: a person converted 12.1 of his UJ hours into extra U1 hours.

27) Using the “Service Summary”

Date Range: 06/01/10 - 07/30/10		Target Population: ALL						
		Detail: Daily						
Case: ALL	SSN: ALL	Name: JONES, TAMMY						
Date: 07/23/2010		LOUISIANA DEPARTMENT OF HEALTH & HOSPITALS						
Time: 12:31:18		LOUISIANA SERVICE TRACKING (v 3.26)						
		25999 PCA R US						
		SERVICE SUMMARY						
Name: JONES, TAMMY		Case #: 00006	SSN: 340-98-3957					
		Target: NOW						
Procedure Code	PA #	PA Date	Weekly Cap	Service Date	Units Used	Spent		
S5125 U1	158795052	07/01/2010-09/30/2010	NA		148	\$ 553.52	Insufficient units.	Insufficient flex units.
				07/01/2010	20			
				07/02/2010	20			
				07/03/2010	20			
				07/04/2010	20			
				07/05/2010	20			
				07/06/2010	20			
				07/07/2010	20		Insufficient units.	No flex units chosen.
				07/11/2010	8		Insufficient units.	Insufficient flex units.
S5125 U1 UN	158795052	07/01/2010-09/30/2010	NA		0	\$ 0.00		
S5125 U1 UP	158795052	07/01/2010-09/30/2010	NA		0	\$ 0.00		
S5125 UJ	158795052	07/01/2010-09/30/2010	NA		60	\$ 130.20	Insufficient units.	No flex units chosen.
				07/08/2010	20			
				07/09/2010	20			
				07/10/2010	20		Insufficient units.	No flex units chosen.
S5125 UN UJ	158795052	07/01/2010-09/30/2010	NA		0	\$ 0.00		
S5125 UP UJ	158795052	07/01/2010-09/30/2010	NA		0	\$ 0.00		
Subtotal:						\$ 683.72		
Total:						\$ 683.72		

This is an example of the “Service Summary” report from SRI. This report summarizes all day-to-day services delivered including type of IFS and amount for each day. This may be useful for:

1. Identification of billing/data entry errors, and/or
2. Determining the type and amount of hours needed in a plan revision.

This report also provides more details about use of IFS Flexibility:

1. **“Insufficient units. No flex units chosen.”** (See bold writing on the far right-hand column): this will appear if all p.a. units of a certain category of IFS were used and if the agency chose not to flex or “borrow” any units from this category.
2. **“Insufficient Units. Insufficient flex units.”** (see bold writing on the far right-hand column): this will appear for two different reasons:
 - a) When an agency tries to borrow flex units from this particular category of IFS, but there are not enough available to borrow from this category.
 - b) When there aren’t enough flex units left to cover the conversion (i.e., 20% limit is met).

28) Important Items

- There is a 20% limit on amount of hours available to “flex”.
 - Be mindful of how *quickly* a person can reach that 20% limit.
- Conversion of one IFS hour type to another is not an even exchange.
 - For example, converting two 1:1 day hours into 2:1 day hours will result in the person actually getting *three* hours of 2:1 coverage. Conversions of hours to 1:1 supports result in reduction of total hours available.
 - For conversion information, look at the IFS Flex Conversion Table in the GFSP Section 5, Attachment 5.10.5.
 - To make sure the conversions are as financially accurate as possible, SRI tracks flex units to the 10th decimal place. This works to the provider’s advantage.

- Billing staff must communicate regularly with Supervisors to let them know where the person stands with his prior-authorized hours and IFS flexible hours:
 - How much of the 20% has the person used?
 - Is it likely the participant will continue to need/request a different type of IFS hour than planned?
 - Might the person need a plan revision to meet needs for the quarter?

29) Plan Revision Needed?

Once SRI begins tracking the 20% limit, providers need to start looking at whether a plan revision may be needed. Due to the 20% limit, IFS flexibility will not be sufficient to cover frequent and/or significant amounts of IFS hourly conversions in a person's schedule for an entire quarter.

To make sure IFS Flexibility is used appropriately so that it will last for the entire quarter, consider the following:

- An accurate, realistic typical weekly schedule is crucial.
- Include the IFS hour types that are used the most in the typical weekly schedule.
 - Swapping IFS hours around in a schedule does not count toward 20% limit, so hours can be moved around as needed.

30) Plan Revision Needed?

When IFS flexibility usage nears the 20% limit, consider:

- How far is the participant into the quarter?
 - If there's just a week or two left, he may be able to use his remaining prior-authorized hours to provide him with what he needs. There may be no need for a plan revision.
- Is he under his allocation?
 - If he is still under his quarterly budget allocation amount, consider requesting a plan revision to access unused dollars in the form of a different type of IFS hour.
 - Revisions of this type are fairly simple to get approved through Region.
 - If he has used his entire budget allocation and is budgeted for the year to meet the maximum for his level membership, then a revision needs to be submitted and approved prior to the person meeting his 20%.
 - OCDD does not guarantee approval of revision requests exceeding the recommendations for level membership. Providers who deliver services above and beyond the approved budget may not receive reimbursement.
 - Revision requests exceeding the allocation may require GPSORC review and approval.

Don't be afraid to request revisions when needed:

- The better the schedule and PA hours reflect the person's true use of hours, the easier the day-to-day administration becomes.
- Documentation, tracking IFS flexibility, and ensuring participants are staying within limits is easier to do with an accurate typical weekly schedule.

- It is also easier for the participant and family to understand their roles and responsibilities in implementation of the support plan if the plan is being delivered as close to the written and signed CPOC as possible.

31) Completing Plan Revisions

Plan revisions should work to:

- Maintain IFS hours usage within the level membership (when possible).
 - If a participant is currently using fewer hours than suggested in the GFSP, the revision request may simply ask for additional hours up to the suggested amount for the level membership.
- Ensure that any revision which includes an alteration in type of support can still provide health/safety assurances and fulfill CPOC goals.
 - This will involve team discussion of risks/benefits with regard to support options. For instance, if a participant is giving up several of her day hours in order to get nighttime hours, how are her daytime needs being met?
- Provide explanation as to whether the change in supports delivery will be ongoing or is a one-time event.
 - Some changes can be made for just one quarter, then a participant can resume his original schedule again.
- Provide justification as to why additional requested hours/ supports are needed.
 - The Regional Office or the GPSORC may ask support teams to consider a variety of other support options that work to promote autonomy, independence, skills building, community inclusion and achievement of personal goals. They may recommend that teams consider the use of unsupported time (if appropriate), natural supports, and/or shared supports.

** Any requests which exceed the quarterly allotment may require GPSORC review.*

32) Example: Needed Plan Revision

This is an example of when a plan revision may be needed because the IFS flexibility limit will likely be exceeded for the quarter:

<i>Tony's Typical Schedule:</i>	<i>Unexpected Deviation:</i>
30 hrs – Day Hab	0 hrs – Day Hab (unplanned vacation)
10 hrs – IFS 1:1 Day	40 hrs – IFS 1:1 Day
72 hrs – IFS 2:1 Day	72 hrs – IFS 2:1 Day
56 hrs – IFS 2:1 Night	56 hrs – IFS 2:1 Night
	<i>= 30 hrs (1:1) short at end</i>

In week 2, Tony misses an entire week of Day Program (30 hours) and uses an extra 30 hours of 1:1 Day instead to take a last-minute, unplanned vacation.

- IFS Flexibility only applies to conversion of IFS hours: Tony cannot convert the unused Day Program hours to cover the extra 1:1 hours he used.
- At this rate, if he continues to abide by his typical weekly schedule and no other changes occur, he will be 30 hours (1:1) short at the end of the quarter.
- He has maxed out his allocation (Level 3) and has no additional unused IFS hours he can access through a plan revision to the Regional Waiver Office.
 - It is expected that any changes or revision will maintain his usage of hours within his allocation. Requesting additional hours via the GPSORC is a last resort.

What are Tony's options?

- If he uses IFS flexibility, he could:
 - Convert some of his prior-authorized 1:1 Day hours into 2:1 Day hours to stretch his hours. This will leave him with very little 1:1 time for the remainder of the quarter.
 - Because he is only in the second week, it is likely he would not be able to make any other conversions in his schedule for the rest of the quarter.
 - Should he miss work unexpectedly again later in the quarter, he would fall short even more.
- Best solution: Request plan revision for just the one quarter.
 - To work within his allocation, he can convert those unused 30 hours of Day Hab into 9 hours of 1:1 Day (retroactively).
 - He can also include some additional 1:1 Day hours in his schedule and move those around in his schedule for when he needs them. He'll primarily use 2:1 Day hours and share supports casually with some friends every weekend rather than using 1:1 Day.
 - With this scenario, he is still within his annual and quarterly budget and can still access his 20% IFS flexibility when necessary to accommodate unexpected events such as sharing 3:1 instead of 2:1.

Review:

1. IFS flexibility allows for participant-driven deviations from typical weekly schedule.
 - No need for plan revision if using IFS flexibility within limits.
2. IFS flexibility involves conversion of IFS hours, does not involve omissions or swapping IFS hours.
3. Limits to IFS flexibility:
 - 20% of total prior-authorized hours can be “flexed” or converted.
 - Use only for unexpected events.
 - Make sure typical schedule is accurate, reflective of routine, includes IFS hour types used most often.
4. IFS Flexibility can be used by:
 - People with plans in new format (per *GFSP*)
 - New participants - initial plans after 7/1/2009
 - Continuing participants - annual plans after 10/1/2009
 - People with old plans – with revisions to Section III.B and III.C
5. Provider Service Plan – provides instructions and details on how supports will be delivered, how IFS flexibility can be offered.
 - Risk mitigation and meeting CPOC goals
6. Provider responsibilities:
 - Assure health/safety, mitigate risks with changes to schedule supports and use of IFS flexibility.
 - Document all deviations from schedule, including omissions.
 - Assist person/family with tracking use of IFS flexibility and prior-authorized hours.
 - Maintain continual communication with support coordinator about usage of hours and notify when plan revision is needed.
7. SRI tracks usage of hours, IFS flexibility through post-authorization process.
8. Billing people and Supervisors in the agency: Communicate with each other. Discuss person’s use of prior-authorized and IFS flexible hours.
9. Plan revisions may be needed:
 - When person has frequent and/or significant amount of IFS conversions in schedule and is nearing 20% limit.
10. Plan revisions should:
 - Maintain IFS hours usage within the level membership (when possible).
 - Ensure that any revision which includes an alteration in type of support can still provide health/safety assurances and fulfill CPOC goals.
 - Provide explanation as to whether change in support delivery will be ongoing or is a one-time event.
 - Provide justification as to why additional requested hours/ supports are needed.
 - May require GPSORC review if exceeds allocation.

References:

Louisiana Department of Health and Hospitals, Office for Citizens with Developmental Disabilities. (2009). *Guidelines for Support Planning*. Baton Rouge, LA.

An electronic version of the *Guidelines for Support Planning* is available at:
<http://www.dhh.louisiana.gov/offices/page.asp?ID=77&Detail=9069>

Job Aids:

- I. IFS Provider Responsibilities with IFS Flexibility:
 - A. Assure health/safety, mitigate risks with changes to scheduled supports and use of IFS flexibility
 - B. Document the use of IFS flexibility and schedule changes
 - C. Keep track of 1) usage of prior-authorized hours and 2) usage of IFS Flexibility
 - D. Communicate this internally and with participants/families to manage hours use in quarter.
 - E. Maintain continual communication with support coordinator about usage of hours and notify him/her when a plan revision is needed
- II. IFS Flexibility allows for participant-driven deviations from the typical weekly schedule and prior-authorized units
 - A. Allows participants to 1) use a type of IFS not included in schedule, or 2) use a type of IFS in excess of what is included in schedule
 - B. Schedule Deviations which do not count toward use of IFS flexibility:
 1. Omissions
 2. Swapping IFS hours
- III. Benefits of IFS Flexibility
 - A. Participants and providers work together to make supports work in the real world
 - B. Reduces the need to request plan revision during the quarter
 - C. Makes sharing supports more functional (casual sharing)
- IV. Who Can Use IFS Flexibility?
 - A. Plans in the new format (*per Guidelines for Support Planning*)
 - B. People with plans in old format will need revisions to Section III of CPOC to use IFS Flexibility
- V. Documentation Requirements in Section III of CPOC
 - A. Section III.B - Current Living Situation (roommates, intermittent supports)
 - B. Section III.C - Current Community Supports (casual sharing)
 - C. See “Accessing IFS Flexibility”
- VI. Provider Service Plan
 - A. Addressing the details of how supports will be delivered and how IFS flexibility can be offered:
 1. Risk mitigation with a change in supports
 2. Meeting CPOC goals with a change in supports
- VII. Decisions About Flexing Hours
 - A. Based on participant-driven preferences, interests, needs
 - B. Consider programmatic implications
 - C. Make sure is allowable (fits in 20% limit and budget amount)
- VIII. Documenting Deviations
 - A. Every deviation, including omissions, must be documented.
 - B. Documentation must include:
 1. Explanation that deviation was participant-driven
 2. Explanation of type of support used in place of scheduled supports
 - C. Documentation should show that deviation was in support of CPOC goals and consistent with service plan instructions
 - D. See “Documentation of Schedule Deviations”
- IX. Limits to IFS Flexibility
 - A. IFS flexibility allowed up to 20% of person’s total prior-authorized hours each quarter
 - B. Once 20% is reached, services provided outside of what is prior-authorized will not be approved
 - C. Due to limits, IFS Flexibility should only be used for unexpected changes in one’s schedule

- X. Billing and IFS Flexibility
 - A. SRI gives prior authorization for entire quarter for a certain amount of hours of IFS (as per CPOC budget sheet)
 - B. Provider bills for IFS hours as person uses them. They are deducted from quarterly total.
 - 1. If have PA for type, provider can bill for hours using that PA
 - 2. If do not have PA for type,
 - a. No PA is required if type not included in original PA
 - b. Enter the service information as delivered
 - c. SRI system will recognize no PA and request provider to specify which type of PA hour the flexible hour will come from
 - d. SRI system will automatically do conversions
- XI. Strategy for Non-Prior Authorized Hours
 - A. SRI system will request provider specify where to pull for conversion hours
 - B. Evaluate hours usage before choosing a category
 - C. Select from PA hours available
- XII. Tracking the 20% Limit
 - A. SRI focuses on quarterly total and post-authorization billing
 - B. SRI begins tracking use of IFS flexibility and the 20% limit when:
 - 1. Use of all prior-authorized hours of a certain type, and keeps using those hours beyond what is prior-authorized, or
 - 2. Use of a type of IFS hour not prior-authorized
- XIII. Using the “CPOC Service Balance”
 - A. Shows what units can billed for (“Units Allowed”)
 - B. Shows the limit on amount of prior-authorized units (“PA CAP Units”)
 - C. Shows how one is working toward 20% limit (“Flex Units Available”)
 - D. Shows amount of prior-authorized units available (“Balance Units”)
- XIV. Using the “Service Event List”
 - A. Shows from what category the flexed units were borrowed (“Borrowed”)
- XV. Using the “Service Summary”
 - A. Assists with billing/data entry errors and determining what is needed in plan revision
 - B. Shows additional detail with use of flexible hours (“Insufficient units. No flex units chosen”)
- XVI. Plan Revision Needed?
 - A. Due to limits, IFS flexibility is insufficient to cover frequent / significant amounts of IFS conversions during a quarter
 - 1. Accurate, realistic typical weekly schedule is crucial
 - 2. Include the IFS hour types that are used the most
 - B. When IFS flexibility nears 20% limit, consider:
 - 1. How far is participant into quarter?
 - 2. Is he under his allocation?
 - 3. Has he maxed out his allocation?
- XVII. Completing Plan Revisions
 - A. Maintain IFS hours usage within the level membership (when possible)
 - B. Ensure that any revision which includes an alteration in type of support can still provide health/safety assurances and fulfill CPOC goals
 - C. Provide explanation as to whether change in support delivery will be ongoing or is a one-time event
 - D. Provide justification as to why additional requested hours/ supports are needed